

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	1		
O.I.P.E. CLASSIFIER		10	4-2-01
FORMALITY REVIEW	VN	778	4/17/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	10 3 8 2 7
1	✓ ✓ ✓ ✓
2	✓ ✓ ✓ ✓
3	✓ ✓ ✓ ✓
4	✓ ✓ ✓ ✓
5	✓ ✓ ✓ ✓
6	✓ ✓ ✓ ✓
7	✓ ✓ ✓ ✓
8	✓ ✓ ✓ ✓
9	N
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15	N
16	✓ ✓ ✓ ✓
17	N
18	N
19	✓ ✓ ✓ 0
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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